

**MANDATORY "Good Standing" DECLARATIONS**

Pursuant to 15 V.S.A. § 795, 32 V.S.A. § 3113b, 21 V.S.A. § 1378b and 4 V.S.A. § 1110c you are required to answer the following:

**Child Support**

You **MUST** check one:

- ☐ I am not subject to a child support order; or
- ☐ I am subject to a child support order and I am in good standing or in full compliance; or
- ☐ I am **not** in good standing or in full compliance.

**Taxes**

You **MUST** check one:

- ☐ I am in good standing in regards to my Vermont Taxes (all returns are filed and paid); or
- ☐ I have never lived or worked in Vermont and do not owe Vermont taxes; or
- ☐ The liability for any Vermont taxes due and payable is on appeal; or
- ☐ I am in compliance with a payment plan approved by Vermont Department of Taxes; or
- ☐ I am **not** in good standing in regards to my Vermont taxes.

**Unemployment Compensation**

You **MUST** check one:

- ☐ This does not apply to me because I have never been an employer in Vermont; or
- ☐ No contributions or payments in lieu of contributions are due and payable; or
- ☐ The liability for any contributions or payments due and payable is on appeal; or
- ☐ I am in compliance with a payment plan approved by the commissioner; or
- ☐ I am **not** in good standing in regards to unemployment compensation.

**District Court Fines / Judicial Bureau Fines**

You **MUST** check one:

- ☐ I do not have any unpaid judgments; or
- ☐ I am in good standing with respect to any unpaid judgments; or
- ☐ I am **not** in good standing in regards to unpaid District Court or Judicial Bureau fines.

Social Security # \_\_\_\_\_ \* Date of Birth \_\_\_\_/\_\_\_\_/19\_\_\_\_

\* The disclosure of your social security number is mandatory; it is solicited by the authority granted by 42 U.S.C. § 405 (c)(2)(C), and will be used in the administration of Vermont law. Your Social Security Number Is Not Subject to Disclosure in a Public Records Request.

**Statement of Applicant**

I certify that the information stated by me in this application is true and accurate to the best of my knowledge, and that I understand providing false information or omission of information is unlawful and may jeopardize my license/certification status.

Printed name: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_